Research Article

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A CLINICAL STUDY OF GREEVABASTI WITH KARPASASTHYADI TAILA IN CERVICAL SPONDYLOSIS

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ABSTRACT

Cervical Spondylosis is one among the degenerative conditions affecting the cervical spine and is commonly identified in *Ayurveda* with *Vataja Nanatmaja Vikaras* like *Manyastambha, Greevastambha*,etc. The word 'Cervical Spondylosis' and its treatment should be viewed from the point of *Vata Vyadhi* only. *Snehana* and *Swedana* are the prime modalities of treatment in the management of *Vata Vyadhis*. The selection of *Bahya Snehana* & *Swedana* is primarily based on the site of pathology and relevance of *GreevaBasti* can be justified as it is applied directly over the affected region. The formulation *Karpasasthyadi Taila* is specifically indicated in all *Vata Vyadhis* as it is described as '*Sarva Anilapaham*'. Hence, a clinical study was undertaken where in 50 patients of Cervical Spondylosis between the age group of 16-70 years were selected and subjected to *GreevaBasti* with *Karpasasthyadi Taila* performed for a period of 7 days. The data collected were analyzed by subjecting to statistical methods such as 'Wilcoxon signed Rank Test' to assess the therapeutic effect of *GreevaBasti* on subjective and objective parameters of Cervical Spondylosis. The observation revealed maximum incidence in *Parihani Avastha* i.e., between 41–70 years of age. All the patients presented with *Samyak Swinna Lakshanas* and the mean of maximum temperature tolerated by patients was 42.57 degree Celsius. The Wilcoxon signed Rank Test revealed statistically significant result in relieving most of the signs and symptoms of Cervical Spondylosis.

Keywords: GreevaBasti, Karpasasthyadi Taila, Vata Vyadhi, Cervical Spondylosis

INTRODUCTION

Ayurveda is not just a science of life; it is indeed a way of life. The speedy-greedy man who violates this way of life by his modified and restless lifestyle may gets entangled in different degenerative diseases even before entering into the degenerative phase of old age. Degenerative joint disease commonly

troubles the human being causing pain, thereby, considerably reduces the human activity in terms of social and professional life. Cervical Spondylosis^{1, 2, 3} is also one such degenerative condition affecting the cervical spine which causes neck pain and may even lead to cervical spondylotic myelopathy. Internationally, Cervical spondylotic myelopathy is the most common cause of non-traumatic spastic paraparesis & quadriparesis, in one report 23.6% of patients of latter had Cervical spondylotic myelopathy (Moore, 1997). Cervical Spondylosis may affect males earlier than females. Another study (Rochester, Hinnestova) has reported that the annual incidence of Cervical Radicular symptoms to be 83.2 per 1,00,000 with a prevalence of 3.5 per 1,000 population. Degenerative disc disorders can be included under the heading of Vata Vyadhi. Hence, the word 'Cervical Spondylosis' & its treatment should be viewed from the point of Vata Vyadhi only. Cervical Spondylosis is commonly identified in Ayurveda with Vataia Nanatmaja Vikaras like Manvastambha. Greevastambha, etc. Snehana and Swedana are the prime modalities of treatment in the management of Vata Vyadhis.⁴ GreevaBasti, as an external therapeutic measure which produces sthanika snehana and swedana effect can be adopted in the management of Cervical Spondylosis. Eventhough, GreevaBasti is not mentioned directly in the classics; it has to be considered as the procedure which has evolved from the procedure ShiroBasti and AkshiTarpana. The selection of Bahya Snehana & Swedana is primarily based on the site of pathology and relevance of GreevaBasti can be justified as it is applied directly over the affected region. The formulation Karpasasthyadi Taila^{5, 6} described in Sahasrayoga is specifically indicated for Pana, NasyaKarma, Abhyanga and it is described as 'Sarva Anilapaham' as it can be employed in all Vata Vyadhis. So, the same was employed for GreevaBasti in the management of Cervical Spondylosis. Thus, by considering the above factors, a clinical study was undertaken to evaluate the therapeutic efficacy of GreevaBasti with Karpasasthyadi Taila in Cervical Spondylosis.

OBJECTIVES OF THE STUDY

To evaluate the therapeutic effect of GreevaBasti with Karpasasthyadi Taila in the management of Cervical Spondylosis. ✤ To analyse and standardise the formulation Karpasasthyadi Taila.

RESEARCH QUESTION

Whether any improvement is seen in GreevaBasti with Karpasasthyadi Taila in the management of Cervical Spondylosis?

HYPOTHESIS

- H⁰: There is no significant therapeutic effect of GreevaBasti with Karpasasthyadi Taila in Cervical Spondylosis.
- H¹: There is significant therapeutic effect of *GreevaBasti* with *Karpasasthyadi Taila* in Cervical Spondylosis.

MATERIALS AND METHODS

Source of Data

- Literature Source: All the Ayurvedic literature, literatures of allied science, contemporary texts, journals and websites about GreevaBasti, Karpasasthyadi Taila and Cervical Spondylosis were reviewed and documented in study.
- Sample Source: 50 patients coming under the inclusion criteria approaching the OPD and IPD of Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan, Karnataka and Sri Kalabyraveshwaraswamy Ayurvedic Medical College, Hospital & Research Center, Bengaluru, Karnataka were selected for the study.
- Medicine Source: Karpasasthyadi Taila was prepared from S.D.M. Ayurveda Pharmacy, Kuthpady, Udupi. The Analytical studies were conducted in SDM Centre for Research in Ayurveda and Allied sciences, Kuthpady, Udupi, Karnataka, India.

Method of Collection of Data

Patients were selected randomly on the basis of clinical examination. A special proforma containing details necessary for the study was prepared. Clinical study was done by adopting GreevaBasti using Karpasasthyadi Taila to the patients of Cervical Spondylosis.

Diagnostic Criteria

- Patients presenting with signs and symptoms of Cervical Spondylosis.
- The diagnosis was radiologically confirmed through X-ray of the Cervical Spine-AnteroPosterior and Lateral view.

Inclusion Criteria

- Patients of both genders between the age group of 16-70 years.
- Patients having the signs and symptoms of Cervical Spondylosis.
- Patients who are fit for Swedana.

Exclusion Criteria

- Patients with major systemic disorders that may interfere with the course of treatment.
- Traumatic, infective and neoplastic conditions of spine.
- Patients who are undergoing other modalities of treatment.

Design of the Study

- It is an open observational clinical study of GreevaBasti with Karpasasthyadi Taila in the management of Cervical Spondylosis where in pre-test and post-test design was done.
- Sample Size: 50 patients fulfilling the inclusion criteria were selected for the study and were subjected to *GreevaBasti* with *Karpasasthyadi Taila*.

The data collected and complied in the study were sorted out, compared & analyzed by subjecting to statistical methods such as 'Wilcoxon signed Rank Test' to assess the therapeutic effect of *GreevaBasti* on subjective and objective parameters of Cervical Spondylosis.

Duration of Study

- ✤ GreevaBasti for 7 days (30 minutes per day).
- Total duration of study was for 7 days.

Investigations

- Blood for Haemoglobin%, Total Count, Differential Count, Erythrocyte Sedimentation Rate and Random Blood Sugar.
- X-ray of the Cervical Spine AnteroPosterior and Lateral view was taken before the treatment to confirm the diagnosis.

Intervention

- *PoorvaKarma* Position of patient and Preparation of Dough.
- PradhanaKarma GreevaBasti using Karpasasthyadi Taila.
- PaschatKarma Sthanika Abhyanga followed by Nadi Sweda.

ASSESSMENT CRITERIA

Subjective & Objective Parameters include the clinical grading and standard scoring method of signs and symptoms of the condition. These data were collected before the commencement of treatment & after the completion of 7 days of treatment. The statistical test 'Wilcoxon signed Rank Test' was applied through the software SPSS for windows (version 20.0).

Table 1: Showing the Assessment parameters of Cervical Spondylosis⁷

Subjective Parameters	Objective Parameters
Neck Pain	Tenderness over Cervical region
Radiation of Pain	Painful Neck Movements
Neck Stiffness	Sensory Loss
Weakness	Power

Parasthesia	Reflexes
Clumsy Finger Movements	Neck Disability Index
Vertigo	

OBSERVATIONS

Table 2: Showing the Observations of the Clinical Study

Sl.No.	OBSERVATION		NO. OF PATIENTS	PERCENTAGE (%)
01.	Age	31 - 40 years	9	18.0%
		41 - 50 years	14	28.0%
		51 - 60 years	16	32.0%
		61 - 70 years	11	22.0%
02.	Sex	Male	23	46.0%
		Female	27	54.0%
03.	Religion	Hindu	48	96.0%
		Muslim	01	2.0%
		Jain	01	2.0%
04.	Education	Uneducated	03	6.0%
		Primary School	02	4.0%
		Middle School	01	2.0%
		High School	14	28.0%
		Pre-University	10	20.0%
		Graduation	20	40.0%
05.	Occupation	Labour	01	2.0%
		Business	15	30.0%
		Service	11	22.0%
		Home makers	23	46.0%
06.	Socio-economic status	Lower Middle	02	4.0%
		Middle	24	48.0%
		Upper Middle	22	44.0%
		Rich	02	4.0%
07.	Marital status	Married	48	96.0%
		Widow	02	4.0%
08.	Desha	Jangala	04	8.0%
		Anupa	01	2.0%
		Sadharana	45	90.0%

SAMYAK SWINNA LAKSHANAS:

Table 3: Showing the Samyak Swinna Lakshanas of GreevaBasti

Samyak Lakshana	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Shoota Unangua	50	50	50	50	50	50	50
Sheeta Uparama	100%	100%	100%	100%	100%	100%	100%

Shoola Unavama	08	18	27	33	41	47	50
Shoola Uparama	16%	36%	54%	66%	82%	94%	100%
Stamble Nievale	10	19	27	36	47	50	50
Stambha Nigraha	20%	38%	54%	72%	94%	100%	100%
Country Niougha	7	17	24	38	43	46	50
Gourava Nigraha	14%	34%	48%	76%	86%	92%	100%
Mardavata	16	29	35	40	47	50	50
	32%	58%	70%	80%	94%	100%	100%
T	20	28	37	39	43	47	50
Twak Prasada	40%	56%	74%	78%	86%	94%	100%
Laghutwa	7	17	24	38	43	46	50
	14%	34%	48%	76%	86%	92%	100%
Sroto Nirmalatwa	20	28	37	39	43	47	50
	40%	56%	74%	78%	86%	94%	100%
Sweda Srava	50	50	50	50	50	50	50
	100%	100%	100%	100%	100%	100%	100%
Agni Deepti	0	0	0	0	0	0	0
	0%	0%	0%	0%	0%	0%	0%
Bhakta Shraddha	0	0	0	0	0	0	0
Dhukia Shruuana	0%	0%	0%	0%	0%	0%	0%
Nidra Haani	0	0	0	0	0	0	0
Niara πααπί	0%	0%	0%	0%	0%	0%	0%
Tandra Haani	0	0	0	0	2	2	2
Тапага паат	0%	0%	0%	0%	4%	4%	4%
Ing dug Duggh gu gu g	0	0	0	0	2	2	2
Jaadya Prashamana	0%	0%	0%	0%	4%	4%	4%
Chastantitua	0	0	0	0	0	0	0
Sheetaartitwa	0%	0%	0%	0%	0%	0%	0%
Sandhi Cheshta	3	9	17	26	38	41	45
sanani Chesnia	6%	18%	34%	52%	76%	82%	90%
Van dhi Haani	08	18	27	33	41	47	50
Vyadhi Haani	16%	36%	54%	66%	82%	94%	100%

All the patients presented with *Samyak Swinna Lakshanas*. None of the patients developed any of the *ayoga* or *atiyoga lakshanas*. No Adverse Drug Reaction was noticed.

Table 4:	Showing the m	ean of maximum t	emperature of Taila	tolerated on each	day of treatment
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Day of Treatment	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Temperature in Celsius	42.33	42.47	42.56	42.70	42.72	42.66	42.58
Mean temperature of 7 days of treatment = 42.57 °C							

Table 5: Showing the mean of maximum temperature of Taila tolerated based on Gender

GENDER	Number of Patients	% of Patients	Mean Temperature
Male	23	46.0%	42.99 ⁰ C
Female	27	54.0%	42.20 ^o C

PRAKRUTI	Number of Patients	% of Patients	Mean Temperature
Vata	01	2.0%	43.84 ⁰ C
Pitta	01	2.0%	39.25 ⁰ C
Kapha	05	10.0%	42.76 ^o C
VataPitta	19	38.0%	42.41 ⁰ C
VataKapha	18	36.0%	42.99 ⁰ C
PittaKapha	06	12.0%	41.95 ⁰ C

Table 6: Showing the mean of maximum temperature of Taila tolerated based on Prakruti

Table 7: Showing the mean of maximum temperature of Taila tolerated based on Rutu

RUTU	Number of Patients	% of Patients	Mean Temperature
Shishira	08	16.0%	43.98 ^o C
Vasanta	07	14.0%	41.65 °C
Greeshma	07	14.0%	40.53 ^o C
Varsha	13	26.0%	42.70 °C
Sharad	08	16.0%	42.93 ⁰ C
Hemanta	07	14.0%	43.23 ^o C

Table 8: Showing the mean of maximum temperature of Taila tolerated based on Desha

DESHA	Number of Patients	% of Patients	Mean Temperature
Jangala	04	8.0%	42.56 ^o C
Anupa	01	2.0%	43.07 ^o C
Sadharana	45	90.0%	42.56 °C

RESULTS

Table 9: Showing the Results of Wilcoxon Signed Rank Test on Signs & Symptoms of Cervical Spondylosis

Sl. No.	VARIABLE	Ranks	Ν	Mean Rank	Sum of Ranks	Z Value	P Value	Result
01	Na da Dalin	NR	48	24.50	1176	-6.216	< 0.001	S
01.	Neck Pain	PR	0	0.00	0.00	-0.210	< 0.001	5
02.	Radiation of Pain	NR	37	19.00	703	5 5 1 9	< 0.001	S
02.	Radiation of Pain	PR	0	0.00	0.00	5.518	< 0.001	5
02	3. Neck Stiffness	NR	35	18.00	630	-5.445	< 0.001	S
03.		PR	0	0.00	0.00	-5.445	< 0.001	3
04.	Weakness	NR	15	8.00	120	-3.690	< 0.001	S
04. Weakness	PR	0	0.00	0.00	-5.090	< 0.001	5	
05.	05. Parasthesia	NR	19	10.00	190	-4.359	< 0.001	S
05.	T al astilesta	PR	0	0.00	0.00	-4.559	< 0.001	
06.	Clumsy	NR	21	11.00	231	-4.413	< 0.001	S
00.	Finger Movements	PR	0	0.00	0.00	-4.415	< 0.001	
07.	Vertigo	NR	18	9.50	171	-4.243	< 0.001	S
07.	verugo	PR	0	0.00	0.00	-4.245	< 0.001	3
08.	Tenderness	NR	28	14.50	406	-4.770	< 0.001	S
00.	1 chuchiess	PR	0	0.00	0.00	-+.//0	~ 0.001	5
09.	Painful	NR	45	23.00	1035	-5.886	< 0.001	S
09.	Neck Movements	PR	0	0.00	0.00	-3.000	~ 0.001	5

10.	Sensory Loss	NR	3	2.00	6	-1.732	> 0.05	NS
		PR	0	0.00	0.00	-1.732		
11.	Power of Shoulder	NR	0	0.00	0.00	-4.243	< 0.001	S
		PR	18	9.50	171	-4.243		
12.	Power of Elbow	NR	0	0.00	0.00	-4.243	< 0.001	S
		PR	18	9.50	171	-7.243		
13.	Power of Wrist	NR	0	0.00	0.00	-3.162	< 0.001	S
		PR	10	5.50	55	-5.102		
14.	Power of Forearm	NR	0	0.00	0.00	-3.464	< 0.001	S
		PR	12	6.50	78	-3.404		
15.	Power of Fingers	NR	0	0.00	0.00	-3.464	< 0.001	S
		PR	12	6.50	78	-3.404		
16.	Biceps Reflex	NR	1	2.00	2.00	-0.577	> 0.05	NS
		PR	2	2.00	4.00	-0.377		
17.	Triceps Reflex	NR	1	2.00	2.00	-0.577	> 0.05	NS
		PR	2	2.00	4.00	-0.377		
18.	Supinator Reflex	NR	0	0.00	0.00	-1.414	> 0.05	NS
		PR	2	1.50	3.00	-1.414		
19.	Neck Disability Index	NR	44	22.50	990	-6.078	< 0.001	S
		PR	0	0.00	0.00	-0.078		

The results of the study revealed that *GreevaBasti* showed statistically significant result on variables Neck Pain, Radiation of Pain, Neck Stiffness, Weakness, Parasthesia, Clumsy Finger Movements, Vertigo, Tenderness, Painful Neck Movements, Power of Shoulder, Elbow, Wrist, Forearm, Fingers & Neck Disability Index; and statistically no significant result on variable Sensory Loss, Biceps Reflex, Triceps Reflex & Supinator Reflex. All the patients in the present study developed *Samyak Swinna Lakshanas*. The mean of maximum temperature of *Taila* tolerated by patients in the entire course of *GreevaBasti* was 42.57^oC.

DISCUSSION

'Vatasyopakramaha Snehaha Swedaha' - Snehana and Swedana are the first and foremost treatment modality in Vataja Vikara such as degenerative disorders. GreevaBasti, as an external therapeutic measure which produces sthanika snehana and swedana effect was adopted in the management of Cervical Spondylosis. GreevaBasti can be considered as Bahya Snehana as ShiroBasti explained un-

der Murdhni Taila is mentioned under Bahya Snehana. Meanwhile, it is considered as Swedana as it involves the usage of heated Taila which induces swedana effect and relieves shula, stambha, sheeta and gourava. Here, we may state that GreevaBasti can be considered under the heading of Sneha vukta Swedana or Snigdha Swedana. The selection of Bahya Snehana and Swedana is primarily based on the site of pathology and relevance of GreevaBasti can be justified as it is applied directly over the affected region, the cervical spine. GreevaBasti is a Bahya Shamana Chikitsa of Retaining type that exerts both Bahya Snehana and Swedana effect. GreevaBasti can be considered under Bahva Snehana, Saagni Sweda, Ekanga Sweda, Snigdha Sweda, Madhvama Sweda, Samshamaneeya Sweda, Drava Sweda and with restricted sense of both Avagaha and Pariseka Sweda. The temperature of Taila was recorded using digital thermometer with features of temperature measurement ranging -50° C to $+300^{\circ}$ C / -58° F to $+572^{\circ}$ F with temperature accuracy $\pm 1^{0}$ C / 1^{0} F. The reading of maximum tolerated temperature of Taila in the pooled GreevaBasti ring

was recorded by dipping the tip of the digital thermometer during the procedure as and when the reheated Taila was poured inside the ring. In the present study, the patients of Vata prakruti, VataKapha prakruti and Kapha prakruti tolerated maximum temperature in comparison to other Prakruti which reflects the predominance of sheeta quality of vata and kapha enables those patients to withstand more temperature. The maximum temperature was tolerated by patients who underwent GreevaBasti during Shishira Rutu and Hemanta Rutu who tolerated the maximum mean temperature of 43.98°C and 43.23°C respectively which reflects the fact that seasonal variation in terms of cold weather enabled those patients to tolerate more temperature. GreevaBasti performed to patients belonged to both Sadharana Desha and Jangala Desha tolerated maximum mean temperature of 42.56°C. Male patients tolerated maximum mean temperature of 42.99°C whereas Female patients tolerated maximum mean temperature of 42.20° C which reflects the fact that males have more endurance to withstand more temperature than females. In toto, the mean of maximum temperature of Taila tolerated by patients in the entire course of GreevaBasti was 42.57°C. 'Harsha Toda Shotha Ruk Avama Stambha Grahadayah, Swinnasya Ashu Prashamyanti Mardavam Cha Upajavate' (Ch.Chi.28/80) and 'Sweda Saadvah Prashamvanti Gada VataKaphatmakah' (Ch.Su.14/3) highlights the role of GreevaBasti in strengthening the cervical spine, neck muscles and ligaments thereby relieving most of the signs and symptoms of cervical spondylosis. GreevaBasti is considered under Snigdha Swedana and the Snigdha as well as Ushna gunas of the procedure acts against Ruksha and Sheeta gunas of Vata. The procedure exerts Srotasam Nirmalatwa effect at the level of cervical spine which facilitates better blood supply to the affected area thereby leading to symptomatic improvement. The combined effect of Sthanika Snehana, Swedana and Shamana action achieved throughout the entire course of GreevaBasti by virtue of its local effect over cervical region results in

improvising the condition thereby relieving the signs and symptoms of Cervical Spondylosis.

CONCLUSION

Cervical Spondylosis is a degenerative condition of the cervical spine presenting with neck pain that reduces the human activity. GreevaBasti is a unique procedure comprising of both bahya snehana and swedana wherein heat is applied to the cervical region by retaining warm medicated oil within a specially formed frame made out of Masha flour. The formulation Karpasasthvadi Taila described in Sahasrayoga is specifically indicated in the treatment of Vata Vyadhi and can be used for external modality of treatment such as GreevaBasti to treat Cervical Spondylosis. The main principle of management was to relieve the degenerative clinical manifestations of Cervical Spondylosis by imparting Snehana, Swedana and Shamana effect through a Bahi Parimarjana modality of treatment in the form of GreevaBasti using Karpasasthyadi Taila. The present clinical study revealed statistically significant result of GreevaBasti with Karpasasthyadi Taila on most of the subjective and objective parameters of Cervical Spondylosis.

REFERENCES

- 1. John Ebnezar, Textbook of Orthopaedics, Third Edition, Published by Jaypee Brothers Medical Publishers (P) Ltd, New Delhi; 2006. Page No. 09.
- Shyamal Sen, API Text of Medicine, 6th Edition, Edited by Sainani G.S., Published by Association of Physicians of India, Mumbai; 1999. Page No. 829.
- Kalyan B. Bhattacharyya, API Text of Medicine, 7th Edition, Edited by Siddharth N.Shah, Published by the Association of Physicians of India, Mumbai; 2003. Page No. 886.
- 4. *Agnivesha, Charaka Samhita*, Edited by Vaidya Jadavaji Trikamji Acharya, Published by Chaukhambha Orientalia, Varanasi; Reprint-2007. Page No. 620.
- 5. SahasraYoga, Sanskrita-Hindi Anuvadha, Anuvadaka- Dr. D. V. Panditarao, Published by Vangmaya Anusandhana Ekaka, Kendriya Ayurved

Evam Siddha Anusandhana Parishad, NewDelhi; 1990. Page No. 252.

The Ayurvedic Formulory of India, Part-1, Government of India, Ministry of Health & Family Welfare, Department of Indian Systems of Medicine & Homeopathy, New Delhi; 2nd Revised English Edition,

Published by the Controller of Publications, Civil lines, Delhi; 2003. Page No. 130-131.

 David J.Magee, Orthopedic Physical Assessment, Fifth Edition, Published by Elservier, 2008. Page No. 130-202.

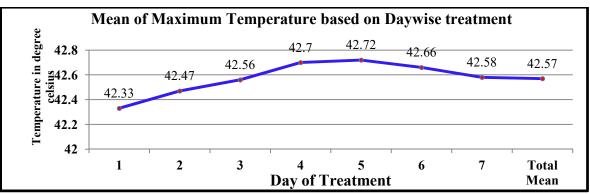


Figure 1: Showing Mean of Maximum Temperature based on Day wise Treatment

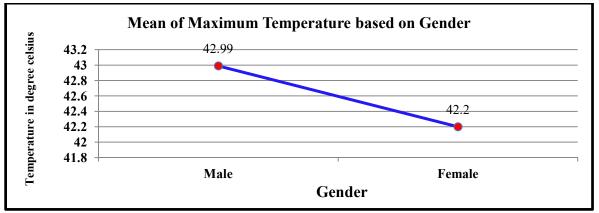
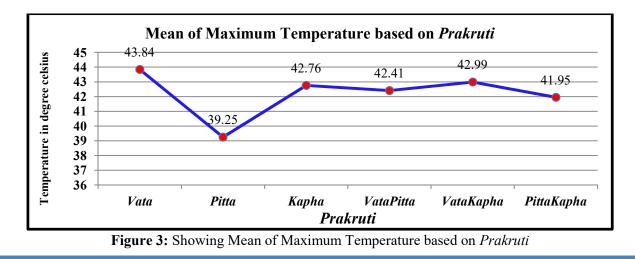


Figure 2: Showing Mean of Maximum Temperature based on Gender



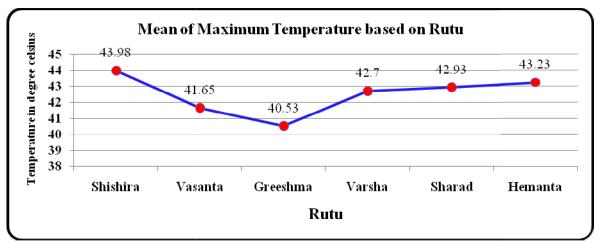


Figure 4: Showing Mean of Maximum Temperature based on Rutu

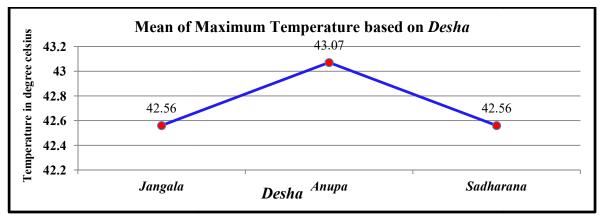


Figure 5: Showing Mean of Maximum Temperature based on Desha

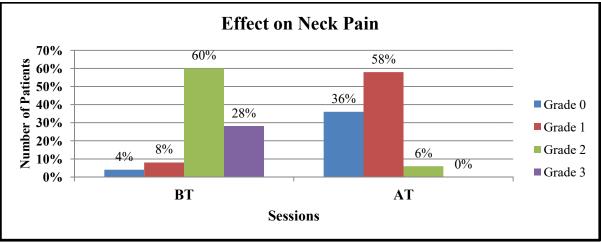


Figure 6: Showing the effect of *GreevaBasti* on Neck Pain

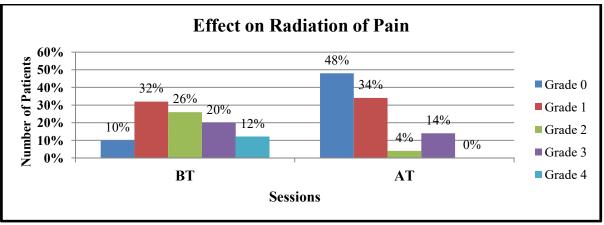


Figure 7: Showing the effect of GreevaBasti on Radiation of Pain

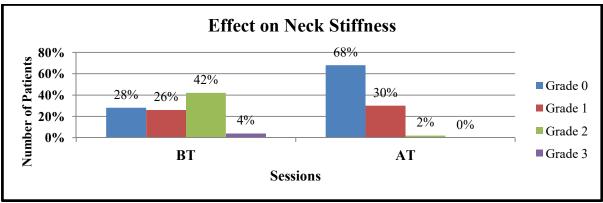


Figure 8: Showing the effect of GreevaBasti on Neck Stiffness

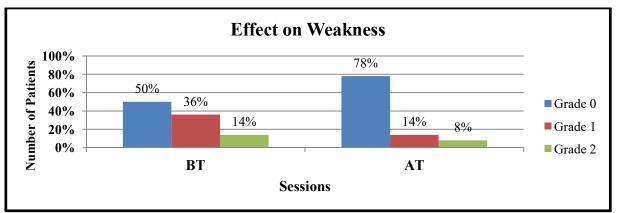


Figure 9: Showing the effect of GreevaBasti on Weakness

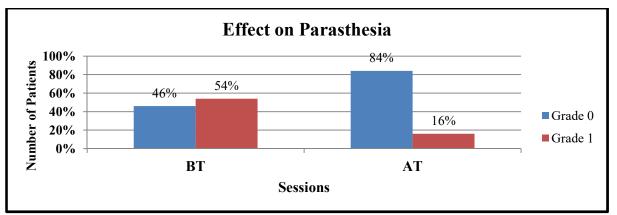


Figure 10: Showing the effect of GreevaBasti on Parasthesia

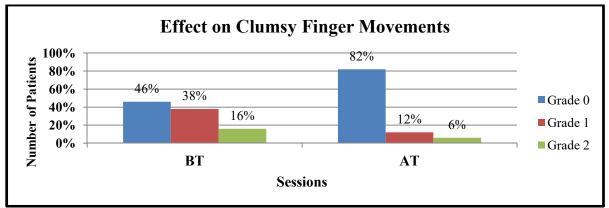


Figure 11: Showing the effect of GreevaBasti on Clumsy Finger Movements

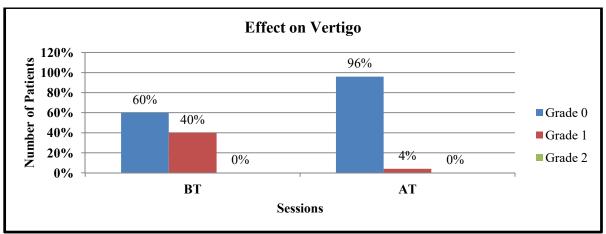


Figure 12: Showing the effect of GreevaBasti on Vertigo

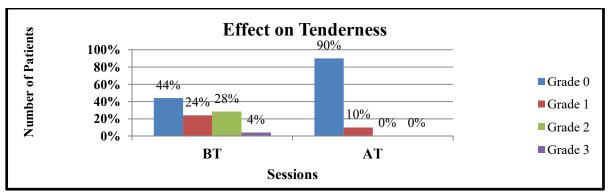


Figure 13: Showing the effect of GreevaBasti on Tenderness

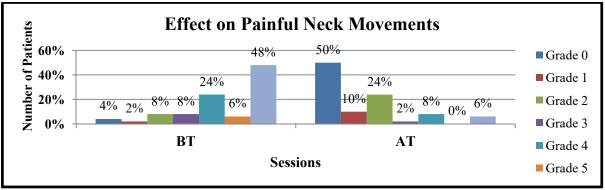


Figure 14: Showing the effect of GreevaBasti on Painful Neck Movements

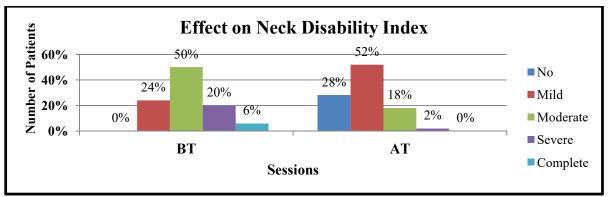


Figure 15: Showing the effect of GreevaBasti on Neck Disability Index

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